

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized CommitteeRECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS14 FEB 14 AM 11:13  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Deb Fischer for US Senate

ADDRESS (number and street)

5555 South St, Ste. 200

Check if different  
than previously  
reported. (ACC)

Lincoln

NE

68506

2. FEC IDENTIFICATION NUMBER ▼

C

C00498907

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
- 
- REPORT

NEW  
(N)

OR

AMENDED  
(A)

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

- (c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2013M M / D D / Y Y Y Y  
12 / 31 / 2013M M / D D / Y Y Y Y  
12 / 31 / 2013

through

M M / D D / Y Y Y Y  
12 / 31 / 2013M M / D D / Y Y Y Y  
12 / 31 / 2013M M / D D / Y Y Y Y  
12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

ROBERT B. EVVEN

Signature of Treasurer

Date

M M / D D / Y Y Y Y  
01 / 31 / 2014M M / D D / Y Y Y Y  
01 / 31 / 2014M M / D D / Y Y Y Y  
01 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)